

BIRTHS EXCEED DEATHS

133

stationary. In 1911 it began a slow but steady increase which has continued to the present, with the exception of the influenza epidemic in 1918, which reduced the population to the lowest point, 82,000 in 1919-20. In 1936 the native population of Fiji reached 97,651.⁶³

The colonial government has been directly concerned with the Fijian population problem, and has made great efforts to prevent depopulation and bring about an increase in the numbers and health of the natives. In 1893 a commission was formed to study the problem of remedies for depopulation, and its monumental recommendations have formed the basis for modern health and medical policy in Fiji and other parts of the Pacific.⁶⁴

The death rate has fallen from over 50 per 1,000 in 1891 to the lowest point of less than 18 per 1,000 in 1933. Chiefly because of dysentery, enteric fever, and pneumonia it rose to 28 per 1,000 in 1936. Dr. S. M. Lambert, director of the Rockefeller Foundation work in Fiji, states "historically the death line shows, to my mind, what constructive medical work can do for a native people. The gradual fall in the death rate can almost be measured in terms of the expansion of medical effort."⁶⁵

⁶³ In 1936 the total population of Fiji was as follows:

	Persons	Percentages
Europeans	4,028	2.03
P.E.N.D. (Anglo-Fijians, Anglo-Polynesians, and others)	4,574	2.31
Fijians	97,651	49.22
Indians	85,002	42.85
Polynesians	3,553	1.79
Melanesians	1,616	.82
Chinese	1,751	.88
All others	204	.10
	198,379	100.00

(Colony of Fiji, Census Report, 1936, p. 4.)

⁶⁴ For recommendations of this commission see *Report of the 1893 Commission on Fijian Depopulation*.

⁶⁵ S. M. Lambert, "The Depopulation of Pacific Races," Bishop Museum Special Publication 23, Honolulu, 1934, p. 22.

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diseases, dysentery, influenza, pneumonia, and tuberculosis take the highest death toll. ^{Today, of infectious} 135 744 [165]

Great efforts have been made to improve the sanitation and housing in the native villages. Attention is placed especially on purification of the water supply and on soil sanitation through the installation of latrines. The village headman is responsible for the enforcement of regulations dealing with sanitation, and the building and spacing of sleeping and kitchen houses.

TABLE 1. INFANT MORTALITY AMONG FIJIANS

Year	Under 1 month	1 month to 1 year	1 to 5 years	Total
1929	111	379	281	771
1930	125	500	549	1,174
1931	107	267	251	625
1932	90	236	140	466
1933	88	244	174	506
1934	99	368	290	757
1935	99	462	358	919
1936	98	424	514	1,036

(Annual Reports, Fiji.)

One of the most important native health measures is the child welfare service initiated by the government in 1927. It has spread gradually through the colony until child welfare committees consisting of native mothers have been established in nearly every Fijian village. They are instructed in child care by the child welfare worker in charge of the district.⁶⁷ The child welfare service is laying a foundation for a higher standard of infant and maternal care. The results of the work can only be seen over a considerable period of time, since they may be counteracted by epidemics such as those of whooping cough, dysentery, and measles, which have increased the infant mortality in the last few years (see Table 1). 746

⁶⁷ Four trained European nurses and fourteen native nurses are engaged in this work. They are aided by district medical officers and native medical practitioners.